

1199 SEIU UNITED HEALTHCARE WORKERS EAST

Plaintiff(s)

Index # 08 CV 398

- against -

Purchased January 15, 2008

PORT JEFFERSON HEALTH CARE CENTER A/K/A GLENHAVEN

Defendant(s)

**AFFIDAVIT OF SERVICE**

STATE OF NEW YORK: COUNTY OF NEW YORK ss:

DAVID KLEINBERG BEING DULY SWORN DEPOSES AND SAYS DEPONENT IS NOT A PARTY TO THIS ACTION, OVER THE AGE OF EIGHTEEN YEARS AND RESIDES IN THE STATE OF NEW YORK.

That on January 28, 2008 at 04:33 PM at

150 DARK HOLLOW ROAD  
PORT JEFFERSON, NY 11777

deponent served the within SUMMONS AND COMPLAINT; INDIVIDUAL PRACTICES OF JUDGE DENNY CHIN; 3RD AMENDED INSTRUCTIONS FOR FILING AN ELECTRONIC CASE OR\* on PORT JEFFERSON HEALTH CARE CENTER A/K/A GLENHAVEN therein named,

**SUITABLE AGE**

by delivering thereat a true copy of each to ANNE KOHLMANN a person of suitable age and discretion. Said premises is Defendant's actual place of business within the state. She identified herself as the GENERAL-AGENT of the Defendant.

Deponent further states that he describes the person actually served as follows:

Sex	Skin Color	Hair Color	Age (Approx.)	Height (Approx.)	Weight (Approx)
FEMALE	WHITE	BLONDE	58	5'2	125

**MAILING**

Deponent enclosed a copy of same in a postpaid wrapper properly addressed to the Defendant at the Defendant's actual place of business at

150 DARK HOLLOW ROAD  
PORT JEFFERSON, NY 11777

and deposited said wrapper in a post office or official depository under exclusive care and custody of the United States Postal Service within New York State on January 29, 2008 by REGULAR FIRST CLASS MAIL in an envelope marked PERSONAL & CONFIDENTIAL and not indicating on the outside thereof, by return address or otherwise, that the communication is from an attorney or concerns an action against the person to be served.

\* APPEAL; PROCEDURES & GUIDELINES FOR ELECTRONIC CASE FILING; INDIVIDUAL PRACTICES OF MAGISTRATE JUDGE MICHAEL H. DOLINGER

That at the time of such service deponent knew the person so served as aforesaid to be the same person mentioned and described as the Defendant in this action.

Sworn to me on: January 29, 2008

JOEL GRABER  
Notary Public, State of New York  
No. 02GR4699723  
Qualified in New York County  
Expires February 10, 2010

JOSEPH KNIGHT  
Notary Public, State of New York  
No. 01KN6178241  
Qualified in New York County  
Expires November 26, 2011

JONATHAN GRABER  
Notary Public, State of New York  
No. 01GR6156780  
Qualified in New York County  
Expires December 4, 2010

**DAVID KLEINBERG**

Invoice #: 455268

# United States District Court

SOUTHERN DISTRICT OF NEW YORK

1199 SEIU UNITED HEALTHCARE WORKERS  
EAST,

## SUMMONS IN A CIVIL CASE

V.

CASE NUMBER:

08 CV 00398

PORT JEFFERSON HEALTH CARE CENTER  
A/K/A GLENHAVEN,

TO: (Name and address of Defendant)

Port Jefferson Health Care Center a/k/a Glenhaven  
150 Dark Hollow Road  
Port Jefferson, New York 11777  
(631) 473-5400

**YOU ARE HEREBY SUMMONED** and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

LOWELL PETERSON, ESQ.  
MEYER, SUOZZI, ENGLISH & KLEIN, P.C.  
1350 BROADWAY, SUITE 501  
NEW YORK, NY 10018

an answer to the complaint which is herewith served upon you, within 20 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

**J. MICHAEL McMAHON**

JAN 15 2008

CLERK

DATE

(BY) DEPUTY CLERK

AO 440 (Rev. 10/93) Summons in a Civil Action –SDNY WEB 4/99

**RETURN OF SERVICE**

Service of the Summons and complaint was made by me <sup>1</sup>	DATE
NAME OF SERVER (PRINT)	TITLE

*Check one box below to indicate appropriate method of service*

- ☐ Served personally upon the defendant. Place where served: \_\_\_\_\_
- ☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.  
Name of person with whom the summons and complaint were left: \_\_\_\_\_
- ☐ Returned unexecuted: \_\_\_\_\_
- ☐ Other (specify): \_\_\_\_\_

**STATEMENT OF SERVICE FEES**

TRAVEL	SERVICES	TOTAL
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**DECLARATION OF SERVER**

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on \_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Server

\_\_\_\_\_  
Address of Server

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.